

Foster Family Home - Corrective Action Report

Provider ID: 2-559726

Home Name: Ludivina Eder, CNA

Review ID: 2-559726-6

147 W. Kinai Place

Reviewer: Carol Copeland

Hilo

HI 96720

Begin Date: 10/29/2019

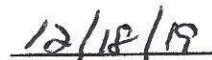
Foster Family Home**Required Certificate****[11-800-6]**

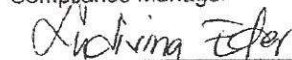
6.(d)(1) Comply with all applicable requirements in this chapter; and

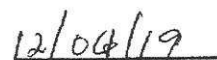
Comment:

6.(d)(1) Home inspection performed to recertify three client home. Home in compliance on day of inspection.



Compliance Manager

Date

Primary Care Giver

Date